

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AB</i>		<i>3/3/99</i>
O.I.P.E. CLASSIFIER	<i>J</i>	<i>71531</i>	<i>3/4/99</i>
FORMALITY REVIEW			<i>3-8-99</i> <i>5-14-99</i>

## INDEX OF CLAIMS

✓ ..... Rejected  
 " ..... Allowed  
 - (Through numeral)..... Canceled  
 - ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
1	8/1/02
2	1/1/03
3	6/1/03
4	10/11/03
5	5/10/04
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21	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here